TOT AVAILABLE CO

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

204552021100

Ī		CLAIMS A	S FILED - PART (İ		S	SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column 1)		(Column 2)		1 T	TYPE		OR		ENTITY	
TOTAL CLAIMS			5	\$.				RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			5 minus 20=		*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			ິງ minus 3 =		*			X42=		OR	\		
М	JLTIPLE DEPE	NDENT CLAIM F	PRESENT					+140=		1	+280=	 	
*	the difference	e in column 1 is	less than a	zero, enter	"0" in (column 2	L	TOTAL		OR OR	TOTAL	אנור	
CLAIMS AS AMENDED - PART II								TOTAL		1 _{OH}		740	
_		(Column 1)		(Colun	nn 2)	(Column 3)	_	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	. 5	Minus	** 2	v.	-		X\$ 9=		OB	X\$18=		
	Independent	* Z ENTATION OF M	Minus	***	3	=		X42=		OR	X84=		
<u> </u>	[TIMOT FALS	!	+140=		OR	+280=							
_							Ĺ	TOTAL			TOTAL		
L		(Column 1)		(Colum	nn 2)	(Column 3)	AL	ODIT. FEE		_	addit. Fee		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	è .	HIGHE NUME PREVIO PAID F	BER (PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 3	Minus	** 2	9	=		X\$ 9=		OR	X\$18≃	LEE	
AME	Independent	. 2	Minus	***	3	=	┝	X42=		1 1	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OB	X 1 -		
							Ľ	+140=		OR	+280=	/	
							ADI	TOTAL DIT. FEE		OR ,	TOTAL DDIT. FEE		
		(Column 1)		(Colum		(Column 3)	ı					,	
AMENDMENT C		REMAINING AFTER AMENDMENT	and the second s	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	F		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	· >	(\$ 9=		OR	X\$18=	<u> </u>	
	Independent	*	Minus	***		=	 	K42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						F			OR	ハリサニ		
* 11	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
1	he "Highest Num	ber Previously Paid	For" (Total or	Independen	t) is the h	nighest number	found i	in the appro	priate box	in colur	nn 1.	Ì	